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2101 7590 05/12/2005

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Samuel J. Petuchowski (Depositor's name)
[Signature] (Signature)
August 9, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/734,732	12/12/2003	Haruhiko H. Asada	1118/191	9585

TITLE OF INVENTION: VIBRATORY VENOUS AND ARTERIAL OXIMETRY SENSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/12/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
KREMER, MATTHEW J	3736	600-335000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 BROMBERG & SUNSTEIN LLP

2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

MASSACHUSETTS INSTITUTE OF
TECHNOLOGY

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CAMBRIDGE, MASSACHUSETTS USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *[Signature]*
Typed or printed name Samuel J. Petuchowski

Date August 9, 2005
Registration No. 37,910

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